

Maryland Weekly Influenza Surveillance Activity Report

A summary of influenza surveillance indicators reported to DHMH for the week ending March 21, 2015

Prepared by the Office of Infectious Disease Epidemiology and Outbreak Response Infectious Disease Bureau – Prevention and Health Promotion Administration Maryland Department of Health and Mental Hygiene

The data presented in this document are provisional and subject to change as additional reports come in.

SUMMARY

During the week ending March 21, 2015, influenza-like illness (ILI) intensity in Maryland was MINIMAL and there was LOCAL geographic spread. The proportion of outpatient visits for ILI reported both by Sentinel Providers and Maryland Emergency Departments increased slightly. The proportion of MRITS respondents reporting ILI jumped. The percentage of specimens testing positive at clinical laboratories increased for the second straight week, with an increase in influenza Type B activity. There was a decrease in the number of specimens testing positive at the DHMH lab. A total of 25 influenza-associated hospitalizations were reported. There was 1 respiratory outbreak. Nationally, influenza activity continued to decline.

ILI Intensity Levels

Minimal

Low

Moderate

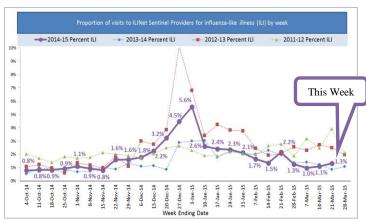
High

Infl	luenza Geographic Spread
	No Activity
	Sporadic
	✓ Local
	Regional
	Widespread

Click here to visit our influenza surveillance web page

ILINet Sentinel Providers

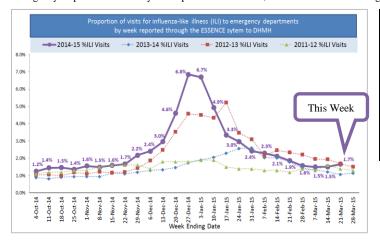
Twenty-six sentinel providers reported a total of 9,023 visits this week. Of those, 120 (1.3%) were visits for ILI. This is **below** the Maryland baseline of 2.0%.



ILI Visits To Sentinel Providers By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	28 (23%)	32 (23%)	1241 (25%)
Age 5-24	47 (39%)	46 (34%)	2048 (41%)
Age 25-49	29 (24%)	29 (21%)	1071 (21%)
Age 50-64	11 (9%)	18 (13%)	462 (9%)
Age ≥ 65	5 (4%)	12 (9%)	227 (4%)
Total ILI Visits	120 (100%)	137 (100%)	5049 (100%)

Visits to Emergency Departments for ILI

Emergency Departments in Maryland reported a total of 48,419 visits this week through the ESSENCE surveillance system. Of those, 802 (1.7%) were visits for ILI.



ILI Visits To Emergency Departments By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	202 (25%)	184 (25%)	7215 (24%)
Age 5-24	242 (30%)	204 (27%)	9097 (31%)
Age 25-49	222 (28%)	219 (29%)	7820 (26%)
Age 50-64	83 (10%)	91 (12%)	3159 (11%)
Age ≥ 65	53 (7%)	46 (6%)	2348 (8%)
Unknown	-		3 (<1%)
Total ILI Visits	802 (100%)	744 (100%)	29642(100%)

Other states' influenza information:

Delaware http://dhss.delaware.gov/dph/epi/influenzahome.html

District of Columbia http://doh.dc.gov/service/influenza

 $\underline{\text{Pennsylvania}} \hspace{2cm} \underline{\text{http://www.portal.state.pa.us/portal/server.pt/community/influenza_(flu)/14161}}$

Virginia http://www.vdh.state.va.us/Epidemiology/flu/

West Virginia http://dhhr.wv.gov/oeps/disease/flu/Pages/fluSurveillance.aspx

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Community-based Influenza Surveillance (MRITS and Google Flu Trends)

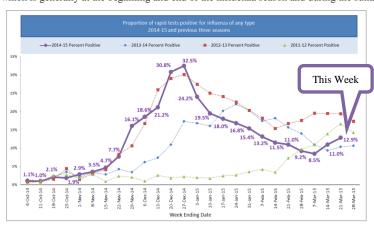
MRITS is the Maryland Resident Influenza Tracking System, a weekly survey for influenza-like illness (ILI). A total of 628 residents responded to the MRITS survey this week. Of those, 6 (1.0%) reported having ILI and missing a cumulative 8 days of regular daily activities. According to Google Flu Trends, influenza activity is "Low" in Maryland.



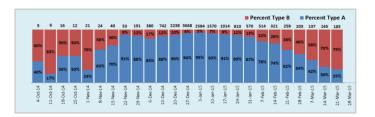


Clinical Laboratory Influenza Testing

Thirty-two clinical laboratories reported performing 1,423 influenza diagnostic tests, mostly rapid influenza diagnostic tests (RIDTs). Of those, 183 (12.9%) were positive for influenza. Of those testing positive, 46 (25.1%) were influenza Type A and 137 (74.9%) were influenza Type B. The reliability of RIDTs depends largely on the conditions under which they are used. False-positive (and true-negative) results are more likely to occur when the disease prevalence in the community is low, which is generally at the beginning and end of the influenza season and during the summer.

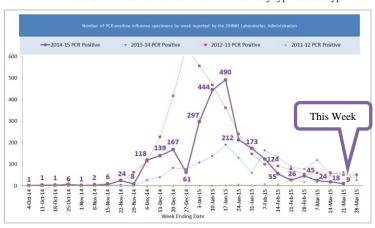


Positive Rapid Flu Tests by Type	This Week Number (%)	Last Week Number (%)	Season Number (%)
Type A	46 (25%)	49 (30%)	13795 (88%)
Туре В	137 (75%)	116 (70%)	1925 (12%)
Total	183 (100%)	165 (100%)	15720(100%)



State Laboratories Administration Influenza Testing

The DHMH Laboratories Administration performed a total of 61 PCR tests for influenza and 9 (14.8%) specimens tested positive. Of those, 3 (33.3%) were Type A (H3N2) and 6 (66.7%) were Type B. PCR testing is more reliable than RIDT. The DHMH testing identifies subtypes of influenza A, information that is not available from the RIDT results. The table below summarizes results by type and subtype.



Positive PCR Tests by Type (Subtype)	This Week Number (%)	Last Week Number (%)	Season Number (%)
Type A (H1)			2 (<1%)
Type A (H3)	3 (33%)	13 (72%)	2378 (97%)
Туре В	6 (67%)	5 (28%)	70 (3%)
A (H3) – B Dual Infection	1		2 (<1%)
Total	9 (100%)	18 (100%)	2452 (100%)

Where to get an influenza vaccination

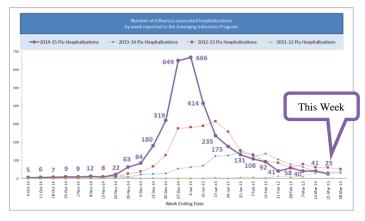
Interested in getting a flu vaccine for the 2014-15 influenza season? Go to http://dhmh.maryland.gov/flumd/SitePages/getvaccinated.aspx and click on your county/city of residence. You will be redirected to your local health department website for local information on where to get your flu vaccine.

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Influenza-associated Hospitalizations

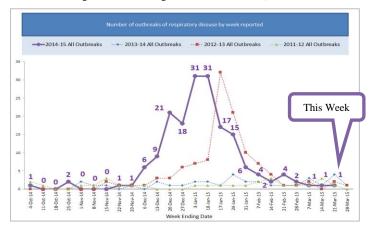
For this week, hospitals in Maryland reported 25 influenza-associated hospitalizations. (A person with an overnight hospital stay along with a positive influenza test of any kind, e.g. RIDT or PCR, is considered an "influenza-associated hospitalization" for purposes of influenza surveillance.)



Influenza- Associated Hospitalizations by Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	1 (4%)	4 (10%)	167 (5%)
Age 5-17	1 (4%)		80 (2%)
Age 18-24	1 (4%)	1 (2%)	77 (2%)
Age 25-49	6 (24%)	7 (17%)	357 (11%)
Age 50-64	6 (24%)	10 (24%)	553 (16%)
Age ≥ 65	10 (40%)	19 (46%)	2165 (64%)
Total	25 (100%)	41 (100%)	3399 (100%)

Outbreaks of Respiratory Disease

There was 1 respiratory outbreak reported to DHMH this week. (Disease outbreaks of any kind are reportable in Maryland. Respiratory outbreaks may be reclassified once a causative agent is detected, e.g. from ILI to influenza.)



Respiratory Outbreaks by Type	This Week Number (%)	Last Week Number (%)	Season Number (%)
Influenza	1 (100%)	1 (100%)	122 (70%)
Influenza-like Illness			36 (21%)
Pneumonia			16 (9%)
Other Respiratory			
Total	1 (100%)	1 (100%)	174 (100%)

National Influenza Surveillance (CDC)

During week 11 (March 15-21, 2015), influenza activity continued to decrease, but remained elevated in the United States.

- Viral Surveillance: Of 12,824 specimens tested and reported by U.S. World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories during week 11, 1,358 (10.6%) were positive for influenza.
- O Pneumonia and Influenza Mortality: The proportion of deaths attributed to pneumonia and influenza (P&I) was above the epidemic threshold.
- O <u>Influenza-associated Pediatric Deaths:</u> Nine influenza-associated pediatric deaths were reported.
- Influenza-associated Hospitalizations: A cumulative rate for the season of 58.4 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported.
- Outpatient Illness Surveillance: The proportion of outpatient visits for influenza-like illness (ILI) was 2.2%, above the national baseline of 2.0%. Six regions reported ILI at or above region-specific baseline levels. Puerto Rico and one state experienced high ILI activity; four states experienced moderate ILI activity; 12 states experienced low ILI activity; New York City and 33 states experienced minimal ILI activity; and the District of Columbia had insufficient data.
- Geographic Spread of Influenza: The geographic spread of influenza in seven states was reported as widespread; Guam, the U.S. Virgin Islands, and 27 states reported regional activity; the District of Columbia, Puerto Rico, and 15 states reported local activity; and one state reported sporadic activity.

